PART B - FEE(S) TRANSMITTAL

uplete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

(571) 273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh

indicated unless corrected be maintenance fee notification	pelow or directed otherwise s.	in Block 1, by (a)	specifying a nev	v correspondence addr	ess; and/or (b) indic	cating a sepa	arate "FEE ADDRESS"
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for 90 09/06/2005	any change of address)		papers. Each addit	. This certificate can	not be used to an assignment	or domestic mailings of for any other accompany ent or formal drawing, m
IP CREATORS P. O. BOX 2789 CUPERTINO, CA					Certificate of Mail	ing or Trans	smission g deposited with the Un st class mail in an envel above, or being facsim date indicated below.
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\ SEP *							(D ·
APPLICATION NO FRA	FILING DATE	F	IRST NAMED INV	/ENTOR	ATTORNEY DO	OCKET NO.	CONFIRMATION NO.
09/779,789	02/07/2001		Behrooz Rezvani		VELCP008X1C 77		7769
FITLE OF INVENTION: M	ETHOD AND APPARATU	S FOR CHANNEL	ESTIMATION I	FOR X-DSL COMMU	INICATIONS		
APPLN. TYPE	SMALL ENTITY	ISSUE FE	Е	PUBLICATION FEE	TOTAL FEE	(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0 	\$700 9/19/2005 OKFLF I		12/06/2005 56 09779789
EXAM	INER	ART UNIT		CLASS-SUBCLASS	09/19/2005 AKELECH2 00000056 097		30.00 OP
AHN, S	SAM K	2637		375-222000	1 [0.000]		30.00 UP
 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names or agents OR, a (2) the name or registered attor 2 registered parts	inting on the patent front page, list ames of up to 3 registered patent attorneys OR, alternatively, ame of a single firm (having as a member a d attorney or agent) and the names of up to red patent attorneys or agents. If no name is oname will be printed. IP Creators Charles C Cary 3			
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI I kanos Cor	mmunication,	clow, no assignee of this form is NOT	lata will appear of a substitute for fi	21 /		below, the d	ocument has been filed
	06/18/2001			! 0	9/19/2005 AKELE	CH2 000000	55 09779789
Please check the appropriate	e: 011674/041 assignee category or category	I ries (will not be pri	nted on the patent): 🗖 Individual 🎖	Collaboration or oth	er private gr	oup entity 100 (60) (fi m
4a. The following fee(s) are	enclosed:		Payment of Fee(,			•
Issue Fee	mall entity discount permitte			amount of the fee(s) i			
Advance Order - # of				redit card. Form PTO-2		ed fee(s) or	credit any overnoument
Ziavance Oraci - # or	Copies		Deposit Account	Number $50-133$	8 (enclo	se an extra c	credit any overpayment copy of this form).
a. Applicant claims SN	(from status indicated above MALL ENTITY status. See 2	37 CFR 1.27.		s no longer claiming SI			
The Director of the USPTO in NOTE: The Issue Fee and Punterest as shown by the reco	is requested to apply the Issu ablication Fee (if required) was of the United States Pate	te Fee and Publicati vill not be accepted ent and Trademark	on Fee (if any) or from anyone othe Office.	to re-apply any previor than the applicant; a	ously paid issue fee registered attorney o	to the applica or agent; or th	ation identified above. he assignee or other part
Authorized Signature	MMM			Date	Sept	ember	14, 2005
Typed or printed name ha	arles C Cary	<i>U</i>		Registra	tion No. 36,7	64	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/779,789

Filing Date 02/07/2001

First Named Inventor Behrooz REZVANI

Group Art Unit 2637

Examiner Name AHN, SAM K

VELCP008X1C Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (check all that apply) Assignment Papers # (for an Application) After Allowance Communication Fee Transmittal Form X to Group Appeal Communication to Board X Drawing(s) Fee Attached of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition # After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) **Provisional Application** Status Letter Power of Attorney, Revocation Change of Correspondence Address Other Endosure(s) (please **Extension of Time Request** identify below): **Terminal Disclaimer** 1-Check of \$730.00 **Express Abandonment Request** 2-PART B-Fee Transmittal Request for Refund Information Disclosure Statement Return Receipt Postcard Certified Copy of Priority Remarks Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT **IP Creators** Individual name Signature Charles C. Cary Reg. #: 36,764 Date September 14, 2005

CERTIFICATE OF TRANSMISSION/MAILING						
thereby certify that this correspondence is the addressed to: Mail Stopt ISSUE FEE, Communications	peing deposited with the United States Ponissioner for Patents, P.O. Box 1450, Ale	ostal Service in an envelope with exandria, VA 22313-1450 on this o	Express mail No. EQ 045976590 US date: September 14, 2005			
Typed or printed name		Charles C. Cary	7			
Signature		Date	September 14, 2005			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/17 (10-03)
Approved for use through 04/30/2003. OMB 0651-0032
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to a collection of information unless it displays a valid OMB control number.

Sep 14, 2005

Date

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

Signature

SEP 1 4 2005

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no persons are required to re

Complete if Known				
Application Number	09/779,789			
Filing Date	02/07/2001			
First Named Inventor	Behrooz REZVANI			
Examiner Name	AHN, SAM K			
Group Art Unit	2637			
Attorney Docket No.	VELCP008X1C			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to: Deposit	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Pescription Fee Pa	aid			
Account 50-1338	Code (\$) Code (\$)	_			
Number Deposit	1031 130 2031 03 Suitalaige late lilling los 6, 553	\dashv			
Account IP Creators	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet \$0	_			
Charge Any Additional Fee Required	1053 130 1053 130 Non-English specification				
Under 37 CFR 1.16 and 1.17	1812 2,520 1812 2,520 For filing a request for ex parte reexamination \$0	\dashv			
Applicant claims small entity status. See 37 CFR 1.27	1804 920* 1804 920* Requesting publication of SIR prior to \$0				
2. X Payment Enclosed: X Check Credit card Money Oth	1805 1,840° 1805 1,840°Requesting publication of SIR after \$0	_			
Credit Card Order Office	1251 110 2251 55 Extension for reply within first month				
FEE CALCULATION	1251 110 2251 35 Extension for reply within its month \$0				
1. BASIC FILING FEE	1253 930 2253 465 Extension for reply within third month				
Large Entity Small Entity Fee Fee Fee Fee Description	1254 1,450 2254 725 Extension for reply within fourth month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Pa					
1001 750 2001 375 Utility filing fee	1401 320 2401 160 Notice of Appeal	\Box			
1002 330 2002 165 Design filing fee	1402 320 2402 160 Filing a brief in support of an appeal				
1003 520 2003 260 Plant filing fee	1403 280 2403 140 Request for oral hearing \$0				
1004 750 2004 375 Reissue filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding \$0				
1005 160 2005 80 Provisional filing fee	1452 110 2452 55 Petition to revive - unavoidable \$0				
SUBTOTAL (1) (\$) 0	1453 1,300 2453 650 Petition to revive - unintentional \$0				
2. EXTRA CLAIM FEES	1501 1,300 2501 650 Utility issue fee (or reissue) \$700	<u> </u>			
Fee from	1502 470 2502 235 Design issue fee \$0				
Total Claims Delow Fee Total Claims Delow Fee So	1503 630 2503 315 Plant issue fee 50				
Independent3 = _3 x \$44 = \$0	1504 300 Pfublication Fee \$0	_			
Claims Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q) \$0				
	1806 180 1806 180 Submission of Information Disclosure Stmt \$0				
Large Entity Small Entity Fee Fee Fee Fee Description	8021 40 8021 40 Recording each patent assignment per property (times number of properties)				
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	1809 750 2809 375 Filing a submission after final rejection \$0 (37 CFR § 1.129(a))				
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not pa	1810 750 2810 375 For each additional invention to be \$0				
1203 280 2203 140 Multiple dependent claims	1801 750 2801 375 Request for Continued Examination (RCE)				
over original patent	1802 900 1802 900 Request for expedited examination \$0				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	of a design application 10 Printed copies of Patent @ \$3.00 \$3.00				
SUBTOTAL (2) (\$) 0	Other ree (specify)				
**or number previously paid, if greater, For Reissues, see abo	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 730				
SUBMITTED BY Complete (if applicable)					
Name (Print/Type) Charles C Cary	Registration No. 36,764 Telephone (408) 850-9583	5			

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